

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Continuing A Majority Party Action Committee (CAMPAC)

ADDRESS (number and street)

5915 Eastman Avenue Suite 100

☐Check if different
than previously
reported. (ACC)

Midland

MI

48640

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00350462

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2008

through

08

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jacqueline M. Medema

Signature of Treasurer

Electronically Filed by Jacqueline M. Medema

Date

09

18

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		102961.75
(b) Cash on Hand at Beginning of Reporting Period	59420.26	
(c) Total Receipts (from Line 19)	44032.73	439703.88
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103452.99	542665.63
7. Total Disbursements (from Line 31)	54124.20	493336.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	49328.79	49328.79
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Continuing A Majority Party Action Committee (CAMPAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	8	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7500.00	76800.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	7500.00	76800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	36500.00	361093.00
(c) Other Political Committees (such as PACs)	44000.00	437893.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	32.73	810.88
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	44032.73	439703.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44032.73	439703.88

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	36357.52	85570.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	36357.52	85570.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17766.68	407766.68
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	54124.20	493336.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54124.20	493336.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	44000.00	437893.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44000.00	437893.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	36357.52	85570.16
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	36357.52	85570.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

SAN MANUAL BAND OF MISSION INDIANS

Mailing Address 26569 COMMUNITY CENTER DRIVE

City

HIGHLAND

State

CA

Zip Code

92346

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.7373

Amount of Each Receipt this Period

2500.00

DONATION

B.

Full Name (Last, First, Middle Initial)

THE CHICKSAW NATION

Mailing Address 1500 N. COUNTRY CLUB ROAD

City

ADA

State

OK

Zip Code

74820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.7354

Amount of Each Receipt this Period

5000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 Abbott Park Rd.
D312 AP6D

City State Zip Code
Abbott Park IL 60064

FEC ID number of contributing
federal political committee.

C C00040279

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11C.7345

Amount of Each Receipt this Period

2500.00

DONATION

B.

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Ave. NW
Suite 700

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00147066

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11C.7346

Amount of Each Receipt this Period

2500.00

DONATION

C.

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 Prince Street
Suite 300

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7358

Amount of Each Receipt this Period

1000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 29

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Mailing Address 50 Beale Street
18-105

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee. **C** C00340364

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 8

Transaction ID: SA11C.7376

Amount of Each Receipt this Period

1000.00

DONATION

B.

Full Name (Last, First, Middle Initial)
BROOKE HOLDINGS-SEP.SEG.FD

Mailing Address 5901 EXECUTIVE DR

City State Zip Code
LANSING MI 48911

FEC ID number of contributing
federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 8

Transaction ID: SA11C.7378

Amount of Each Receipt this Period

1500.00

DONATION

C.

Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 Capital One Drive
Attn: 19050-1204

City State Zip Code
McLean VA 22102

FEC ID number of contributing
federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7360

Amount of Each Receipt this Period

1000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 / 29

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

CREDIT SUISSE FIRST BOSTON CORPORATION GOV'T ACTION FUND

Mailing Address 1155 21ST STREET NW SUITE 300

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.**C** C00111559

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	8

Transaction ID: SA11C.7357

Amount of Each Receipt this Period

2000.00

DONATION

B.

Full Name (Last, First, Middle Initial)

DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 365

City

Washington

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	8

Transaction ID: SA11C.7347

Amount of Each Receipt this Period

2000.00

DONATION

C.

Full Name (Last, First, Middle Initial)

DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 365

City

Washington

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	4	/	2	0	0	8

Transaction ID: SA11C.7356

Amount of Each Receipt this Period

3000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

FMR LLC POLITICAL ACTION COMMITTEE (FIDELITY PAC)

Mailing Address 82 Devonshire Street

City

Boston

State

MA

Zip Code

02109

FEC ID number of contributing
federal political committee.

C C00215046

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7364

Amount of Each Receipt this Period

1000.00

DONATION

B.

Full Name (Last, First, Middle Initial)

MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 1420 New York Avenue NW Suite 600

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00311878

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11C.7348

Amount of Each Receipt this Period

1000.00

DONATION

C.

Full Name (Last, First, Middle Initial)

MERCK & CO. INC. EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Mailing Address 601 Pennsylvania Ave. NW
North Building Suite 1200

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00097485

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7369

Amount of Each Receipt this Period

5000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

MICHIGAN CREDIT UNION LEAGUE LEGISLATIVE ACTION FUND

Mailing Address 15800 N HAGGERTY
PO BOX 8054

City State Zip Code
PLYMOUTH MI 48170

FEC ID number of contributing
federal political committee.

C C00139279

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 2 / 2 0 0 8

Transaction ID: SA11C.7379

Amount of Each Receipt this Period

5000.00

DONATION

B.

Full Name (Last, First, Middle Initial)

NATIONAL GROUND WATER ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 601 DEMPSEY RD

City State Zip Code
WESTERVILLE OH 43081

FEC ID number of contributing
federal political committee.

C C00340836

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11C.7350

Amount of Each Receipt this Period

1000.00

DONATION

C.

Full Name (Last, First, Middle Initial)

SMITHKLINE BEECHAM CORP. PAC (GLAXOSMITHKLINE PAC)

Mailing Address Five Moore Drive P.O. Box 13358
P.O. Box 13358

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing
federal political committee.

C C00199703

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7368

Amount of Each Receipt this Period

1000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City

RENVILLE

State

MN

Zip Code

56284

FEC ID number of contributing
federal political committee.

C C00166348

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: SA11C.7370

Amount of Each Receipt this Period

5000.00

DONATION

B.

Full Name (Last, First, Middle Initial)

WYETH GOOD GOVERNMENT FUND

Mailing Address Five Giralda Farms

City

Madison

State

NJ

Zip Code

07940

FEC ID number of contributing
federal political committee.

C C00115303

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 0 8

Transaction ID: SA11C.7352

Amount of Each Receipt this Period

1000.00

DONATION

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

36500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 29

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

CHEMICAL BANK & TRUST

Mailing Address 333 E. MAIN STREET

City

MIDLAND

State

MI

Zip Code

48640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

810.88

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 8

Transaction ID: SA17.7415

Amount of Each Receipt this Period

32.73

INTEREST

SUBTOTAL of Receipts This Page (optional)

32.73

TOTAL This Period (last page this line number only)

32.73

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BURNSIDE & LANG, PC</p> <p>Mailing Address 5915 EASTMAN AVE SUITE 100</p> <p>City MIDLAND State MI Zip Code 48640</p> <p>Purpose of Disbursement ACCOUNTING FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7388</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 2 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1003.01</div> </p> <p>Category/Type <div>001</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP</p> <p>Mailing Address 2501 WISCONSIN AVE NW SUITE 304</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement FUNDRAISING EXPENSES (SEE MEMO)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7400</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 8 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>4993.21</div> </p> <p>Category/Type <div>003</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) UNITED AIRLINES</p> <p>Mailing Address 77 WACKER DRIVE</p> <p>City CHICAGO State IL Zip Code</p> <p>Purpose of Disbursement AIRFARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.7400.0</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 8 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>1077.70</div> </p> <p>Category/Type <div>003</div> </p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

5996.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

ALASKA AIRLINES

Mailing Address PO BOX 68900

City
SEATTLE

State
WA

Zip Code
98168

Purpose of Disbursement
AIRFARE

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7400.1

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

599.50

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SAN YSIDRO RANCH

Mailing Address 900 SAN YSIDRO LANE

City
SANTA BARBARA

State
CA

Zip Code
93108

Purpose of Disbursement
FACILITY DEPOSIT FOR FUTURE EVENT

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7400.2

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

RUTH'S CHRIS

Mailing Address 1801 CONNECTICUT NW

City
WASHINGTON

State
DC

Zip Code
20009

Purpose of Disbursement
FOOD COSTS FOR EVENT

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7400.3

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1668.43

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

UNWINED

Mailing Address 3690 KING STREET #J

City
ALEXANDRIA

State
VA

Zip Code
22302

Purpose of Disbursement
FOOD COSTS FOR EVENT

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7400.4

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

430.64

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

THE LEVANTINO GROUP

Mailing Address 2501 WISCONSIN AVE NW
 SUITE 304

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
FUNDRAISING COORDINATION FEE

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.7412

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

30359.30

SUBTOTAL of Disbursements This Page (optional)

30359.30

TOTAL This Period (last page this line number only)

36355.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial)
BILL CASSIDY FOR CONGRESS

Mailing Address 3482 DRUSILLA LANE SUITE 1

City State Zip Code
BATON ROUGE LA 70809Purpose of Disbursement
CONTRIBUTION TO CANDIDATECandidate Name
WILLIAM CASSIDYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 06

Transaction ID: SB23.7380

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
CULBERSON FOR CONGRESS

Mailing Address P.O. Box 41964

City State Zip Code
Houston TX 77241Purpose of Disbursement
CONTRIBUTION TO CANDIDATECandidate Name
JOHN CULBERSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 07

Transaction ID: SB23.7414

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF GLENN THOMPSON

Mailing Address 198 PARK ROAD

City State Zip Code
HOWARD PA 16841Purpose of Disbursement
CONTRIBUTION TO CANDIDATECandidate Name
GLENN THOMPSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 05

Transaction ID: SB23.7383

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	8

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A.

Full Name (Last, First, Middle Initial)

HELLER FOR CONGRESS

Mailing Address 7840 Red Leaf Drive

City
Las Vegas

State
NV

Zip Code
89131

Purpose of Disbursement
CONTRIBUTION TO CANDIDATE

Candidate Name
DEAN HELLER

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.7389

Date of Disbursement

08 / 19 / 2008

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

KIRK FOR CONGRESS

Mailing Address 28 GREENBAY ROAD

City
WINNETKA

State
IL

Zip Code
60093

Purpose of Disbursement
CONTRIBUTION TO CANDIDATE

Candidate Name
MARK STEVEN KIRK

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Transaction ID: SB23.7386

Date of Disbursement

08 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

THE LEVANTINO GROUP

Mailing Address 2501 WISCONSIN AVE NW
SUITE 304

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
PAYMENT OF IN-KIND CATERING-LINDER

Candidate Name
LINDER FOR CONGRESS

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 07

Transaction ID: SB23.7391

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1766.68

SUBTOTAL of Disbursements This Page (optional)

4766.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP</p> <p>Mailing Address 2501 WISCONSIN AVE NW SUITE 304</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement IN-KIND FUNDRAISING COSTS-BUCHANAN</p> <p>Candidate Name VERN BUCHANAN FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7393</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 8</div> <div>2 8</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>500.00</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP</p> <p>Mailing Address 2501 WISCONSIN AVE NW SUITE 304</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement IN-KIND FUNDRAISING COSTS</p> <p>Candidate Name FRIENDS OF DAVE REICHERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7394</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 8</div> <div>2 8</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>500.00</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP</p> <p>Mailing Address 2501 WISCONSIN AVE NW SUITE 304</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement IN-KIND FUNDRAISING COSTS-HAYES</p> <p>Candidate Name HAYES FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7395</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 8</div> <div>2 8</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>500.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP	Transaction ID: SB23.7396 Date of Disbursement																				
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	8												
City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period																				
Purpose of Disbursement IN-KIND FUNDRAISING COSTS-MUSGRAVE	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name MUSGRAVE FOR CONGRESS	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP	Transaction ID: SB23.7397 Date of Disbursement																				
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	8												
City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period																				
Purpose of Disbursement IN-KIND FUNDRAISING COSTS-LATOURETTE	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name LATOURETTE FOR CONGRESS COMMITTEE	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) THE LEVANTINO GROUP	Transaction ID: SB23.7398 Date of Disbursement																				
Mailing Address 2501 WISCONSIN AVE NW SUITE 304	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	8												
City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period																				
Purpose of Disbursement IN-KIND FUNDRAISING COSTS	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name BACHMANN FOR CONGRESS	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Continuing A Majority Party Action Committee (CAMPAC)

State: MO District: 06

State: MI District: 07

State: VA District: 02

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 29

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 THE LEVANTINO GROUP

 Nature of Debt (Purpose):
 IN-KIND-FUND RAISER EXPEN-
 SES-WALBERG

 Mailing Address 2501 WISCONSIN AVE NW
 SUITE 304

 City State ZIP Code
 WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7049

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 THE LEVANTINO GROUP

 Nature of Debt (Purpose):
 IN-KIND FUND RAISER EXPEN-
 SES-BUCHANAN

 Mailing Address 2501 WISCONSIN AVE NW
 SUITE 304

 City State ZIP Code
 WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7048

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 THE LEVANTINO GROUP

 Nature of Debt (Purpose):
 IN-KIND-FUND RAISER EXPEN-
 SES-REICHERT

 Mailing Address 2501 WISCONSIN AVE NW
 SUITE 304

 City State ZIP Code
 WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7050

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 / 29

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
IN-KIND FUNDRAISING EXPEN-
SES-HAYESMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7096

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
IN-KIND FUNDRAISING EXPEN-
SES-MUSGRAVEMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7098

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
IN-KIND CATERING-LINDERMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

1766.68

Transaction ID: SD10.7339

Amount Incurred This Period

0.00

Payment This Period

1766.68

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 / 29

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Continuing A Majority Party Action Committee (CAMPAC)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
INKIND FUNDRAISING EXPENS-
ES-LATOURETTEMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7242

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
INKIND FUNDRAISING EXPENS-
ES-BACHMANMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7243

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
THE LEVANTINO GROUPNature of Debt (Purpose):
INKIND FUNDRAISING EXPENS-
ES-GRAVESMailing Address 2501 WISCONSIN AVE NW
SUITE 304City State ZIP Code
WASHINGTON DC 20007

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.7244

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....

0.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

0.00

Image# 28933079334

Form/Schedule: **SB21B**

Transaction ID: **SB21B.7400**

FUNDRAISING EVENT EXPENSES INCLUDE FOOD COSTS, POSTAGE, TRANSPORTATION, PARKING, LODGING, AND TRAVEL. THESE COSTS ARE FOR EXPENSES INCURRED ON BEHALF OF CAMPAC AND ARE NOT COSTS ASSOCIATED WITH ANY SPECIFIC CAMPAIGN. THE MINIMIZATION OF VENDORS WITH COSTS THAT EXCEED \$200 ARE LISTED BELOW

Form/Schedule: **SB21B**

Transaction ID: **SB21B.7412**

FUNDRAISING COORDINATION FEES PAID WERE FOR ORGANIZING AND CONDUCTING FUNDRAISING EVENTS. THESE COSTS ARE FOR EXPENSES INCURRED ON BEHALF OF CAMPAC AND ARE NOT COSTS ASSOCIATED WITH ANY SPECIFIC CAMPAIGN.

Form/Schedule:SD10

Transaction ID: SD10.7049

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Form/Schedule:SD10

Transaction ID: SD10.7048

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Form/Schedule:SD10

Transaction ID: SD10.7050

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE AND FOOD AND BEVERAGES FOR EVENT

Form/Schedule:SD10

Transaction ID: SD10.7096

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD AND BEVERAGES FOR THE E

Form/Schedule:SD10
Transaction ID: SD10.7242

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD/BEVERAGES FOR EVENT.

Form/Schedule:SD10
Transaction ID: SD10.7243

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD/BEVERAGES FOR EVENT.

Form/Schedule:SD10

Transaction ID: SD10.7244

EXPENSES INCLUDE FUNDRAISING SERVICES, USE OF SPACE, AND FOOD/BEVERAGES FOR EVENT.